

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

~~Substitute for form 1449/PTO~~

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet

9

Complete if Known

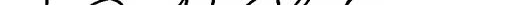
 Information Disclosure Statement by Applicant				<i>Complete if Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)				Application Number	10/773,510
				Filing Date	February 6, 2004
				First Named Inventor	Wesley C. Sodemann
				Group Art Unit	2834
				Examiner Name	Iraj A. Mohandes
Sheet	1	of	1	Attorney Docket Number	039189-9071-01

U.S. PATENT DOCUMENTS

Examiner Initials		U.S. Patent Document Number	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document
IM		4,937,561	Sasaki, et al.	6/26/1990
IM		5,353,762	Dykstra, et al.	10/11/1994
IM		6,445,287	Schofield, et al.	9/3/2002

FOREIGN PATENT DOCUMENTS

Examiner Initials	Country Code	Foreign Patent Document Number	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document	Translation	English Abstract
14	GB	2 264 825	Kiken KK	9/8/1993		
11	GB	1 296 220	Moore, Thomas	11/15/1972		
11	DE	199 07 606	Sew Eurodrive GMBH & Co.	8/31/2000		X

Examiner Signature		Date Considered	10/27/09
--------------------	---	-----------------	----------

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 600. Draw line through citation if

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information

Officer, Patent and Trademark Office, Washington, DC 0231.
DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box